Break-out session
Mental Health
October 28, 2008
Facilitated by Anne Drumm





Sessions are taped to capture main points...



But your identity will not be put under a microscope!





Consent Alternative Review Process

- 5 alternatives to providing choice to patients for exchange of health information for treatment.
- From Opt-In with Restrictions to No Consent
- Several scenarios include Calvin P. Sab
- Pros and cons





5 consent Alternatives

- No Consent Patient records are accessible through HIE
- Opt Out Patient records are accessible through HIE until the patient indicates records are not to be exchanged via HIE
- Opt In with Restrictions After Patient opts in, only the records they indicate are accessible through HIE
- Opt Out with Exceptions Patient records are accessible through HIE until the patient indicates records are not to be exchanged via HIE, however s/he can stipulate specific records remain available
- Opt In Patient records are not accessible through HIE until s/he opts in to have all their records accessible through HIE





Process

- Privacy Committee explore patient consent
 - Mental Health Task Group issue specific
- Work Product will be subject of discussion
- Before we delve in......







- Audience Response Device
- On Your Chair
- Opportunity to Choose Alternative







Stakeholder Poll

Which stakeholder group do you represent?

- 1. Consumers
- 2. Plans/Payers
- 3. Government
- 4. Education
- Professional Associations

- 6. Vendor
- 7. Hospitals
- 8. Community Clinics
- 9. Other







Entrance Poll

Which consent alternative would you choose right now?

- No Consent
- 2. Opt Out
- 3. Opt In with Restrictions
- 4. Opt Out with Exceptions
- 5. Opt In







PANEL MEMBERS

- Stephanie Oprendek, Ph.D., California Department of Mental Health (former)
- Judith Miller, Los Angeles County Department of Mental Health
- Kevin D. Dickey, Information Security, Contra Costa County
- Sean Rashkis, J.D., Disability Rights California





Stephanie Oprendek, Ph.D.,

California Department of Mental Health (former)





Panel Discussion

Consent Alternative 1 – Judith Miller

- NO CONSENT (Patient auto in)
- Calvin does not have a choice; his information is in the system and may be transmitted.





No Consent Alternative

Calvin P. Sab is our patient.

Calvin sees his primary physician for his hypertension and

He is referred to Dr. Smith, psychiatrist at the Rosedale Community Clinic for depression







No Consent Option – Mental Health Setting

- Dr. Smith performs assessment. Orders lab tests through HIE.
- Calvin visits the lab and his results are posted via the HIE..
- On second visit, Dr. Smith reviews the lab results and all of Calvin's current medications via the HIE.
- Notes medications for hypertension and changes his treatment protocol to avoid adverse drug reaction.







Calvin does not have negative drug interactions

Calvin wonders where his information may go??







Privacy Findings

No Consent

- No choice for MH client. MH information being treated the same as other health information
- + Most quality of care
- + Least costly/most sustainable
- Most legal risk
- Inconsistent with CalPSAB Principles

Note: Patients may forego treatment

Patients may withhold information





Secure Access to Health Information Kevin Dickey

Authentication Method	Name and Password \$
<u>U</u> sername	user
<u>P</u> assword	****

There are two sides to an electronic exchange of health information





The patient and his health information



Access to Calvin's health information is controlled.





Education

- All consent options and consumer groups will require education.
- Objective: Inform, Build Trust and Confidence
- What is communicated a "No Consent" Model
 - HIE new concept as many do not know about it
 - Benefits to consumer and how the information will be used
 - Privacy and security features
- Challenges







Sean Rashkis, J.D., Consumer Perspective









Consent Alternative 2 Judith Miller

- **OPT OUT** (Patient auto in)
- Calvin has a choice; his information is in the system, but he can choose to not have it in
- Calvin's does nothing thus all his information remains in the HIE.





Electronic Prescribing Scenario with Opt Out

Remember Calvin P. Sab

Same as for No Consent

Result – No negative drug interactions







Privacy Findings

Opt Out

(Patient Auto In)

- Little Patient Choice and Control
- More quality of care
- + Less costly more sustainable
- More legal risk
- Inconsistent with CalPSAB principles





Security

Does not change





Education

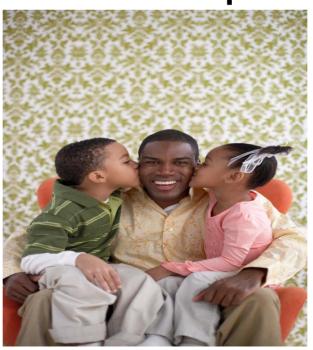
- Education same baseline components: inform, build trust and confidence.
- This consent option requires extra education effort to ensure that the consumer understands the choice.
- Challenges







Sean Rashkis, J.D., Disability Rights California Consumer Perspective







Consent Alternative 3

- **OPT IN with Restrictions** (Patient auto out, choice to be in, choice on what goes in)
- Calvin has a choice; his information is not in the system
- Calvin chooses to opt in <u>except for mental</u> <u>health information</u>





- Remember Calvin
- His knee aches





He sees an orthopedic doctor





HOSPITAL?







Privacy Findings

Opt In w/Restrictions

(Patient auto OUT plus Choice)

- Most Patient choice
- Less quality of care
- Most costly/least sustainable
- + Less legal risk
- + Consistent with CalPSAB principles





Security

More Complex = More Costly





- Education most complex for this option.
 - Choices can be confusing or intimidating for consumer
 - More costly to educate on
 - Education must explain the benefit of opting in with the fewest restrictions
- Challenges





Sean Rashkis Consumer Perspective







Final Polling

- 1. No Consent
- 2. Opt Out
- 3. Opt In with Restrictions
- 4. Opt Out with Exceptions
- 5. Opt In





Thank you for your participation!!

We'll be going back to the
Camellia Room for
Closing Remarks and to learn how the
break out sessions voted.



